

# Keers Remediation, Inc. Keers Facility Services, LLC. Application for Employment

## PLEASE PRINT - EACH ITEM MUST BE FILLED IN

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or handicap.

DA	TE: Position Applied for:		
LE	GAL NAME:		
	LEPHONE: EMAIL ADDRESS:		
Ad	DRESS:		
Re	ferral if any:		
1.	Have you filed an application here before? Yes No If yes, give date		
2.	Have you ever been employed here before? Yes No		
3.	Are you employed now? Yes No		
	May we contact your present employer? Yes No		
4.	If employed and you are under 18, can you furnish a work permit? Yes No		
5.	. On what date would you be available for work?		
6.	Are you available to work Full Time Part Time, or Temporary?		
	Explain:		
7.	Are you on a lay-off and subject to recall? Yes No		
8.	Have you had in the past or do you at the present time have any respiratory problems? Yes No		
	If yes, please explain		
9.	Have you ever been involved in a Worker's Compensation claim due to an injury incurred at work? Yes		
	No. If yes, please explain		

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Please initial this page after completing \_

10.	Do you have any physical limitations or work restrictions such as, but not limited to: bad back, poor eyesight, arthritis, fear of heights & enclosed places or any other limitations? Yes No. If yes, please explain
11.	Have you ever received unemployment compensation within the last three (3) years? Yes No. If yes, please explain each time and the length of time
12.	Do you currently consume tobacco? Yes No
13.	Have you ever worked with asbestos or any other hazardous materials in the past? Yes No. If yes,
	please explain
14.	Is there any reason why you would not be able to wear personal protective equipment including disposable clothing and a fitted NIOSH approved respirator? Yes No. If yes, please explain
15.	Have you had an Asbestos or Hazmat Medical Examination within the last year? Yes No
16.	List any special training that you have that you feel would be beneficial to KEERS if employed

## PLEASE READ CAREFULLY

We're proud that our success is the result of the quality and caliber of our employees. You are applying for a position whose acceptance will place you in a category of recognized professionals. In pursuit of that excellence we require, as a condition of employment, that all applicants consent to and authorize a pre-employment and/or continued employment verification of their background, including information submitted on their application or resume.

### APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION

This release and authorization acknowledges that KEERS may now, or at any time while I am employed, conduct a verification of my education, previous employment/work history, credit history, contact personal references, motor vehicle records, conduct drug testing and to receive any criminal history record to verify any other information deemed necessary to fulfill the job requirements. The results of this verification process will be used to determine employment eligibility under KEERS employment policies.

<u>I have read and understand this release and consent, and I authorize the background verification</u>. I authorize persons, schools, current and former employers, and other organizations and Agencies to provide Keers with all information that may be requested. I hereby release all of the persons and Agencies providing such information that may be requested. I hereby release all of the persons and Agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is as valid as the original.

I do hereby agree to forever release and discharge KEERS Remediation, Inc., and their associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs and expenses, or any other charge or complaint filed with any Agency arising from the retrieving and reporting of information. According to the Federal Fair Credit Reporting Act, I am entitled to know if employment was denied based on information obtained by my prospective employer and to receive, upon written request, a disclosure of the public record information and of the nature and scope of the investigative report.

CONFIDENTIAL INFORMATION: FOR POSITIVE IDENTIFICATION PURPOSES ONLY

APPLICANT:

Name Typed or Printed	Date of Birth	Date of Birth	
Signature	Drivers License Number		
Maiden or other names	State (DL#)	Today's Date	
Address	City, State, Zip		

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# PAST EMPLOYMENT INFORMATION Please List Most Recent First

(Fill out all information completely)

Employer		Telephone	_ Supervisor	
Address		Job Title		
Job Duties				
Dates Employed from	to	Hourly Salary Starting	Final	
Reason for Leaving				
What did you LIKE about this job				
What did you NOT like about this job				
Employer				
Address		Job Title		
Job Duties				
Dates Employed from	to	Hourly Salary Starting	Final	
Reason for Leaving				
What did you LIKE about this job				
What did you NOT like about this job				
Employer				
Address		Job Title	· ·	
Job Duties				
Dates Employed from	to	Hourly Salary Starting	Final	
Reason for Leaving				
What did you LIKE about this job				
What did you NOT like about this job				
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#### EDUCATION INFORMATION

	Elementary	High	College
SCHOOL NAME YEARS			
	1 2 3 4 5 6 7 8	9 10 11 12	1 2 3 4 5 6
I CAN SPEAK, READ AND W	VRITE: ENGLISH SPANIS	SH OTHER	

#### EDUCATION REFERENCES

Please list below all colleges, universities, trade schools, and industry specific courses. Attach copies of all degrees and certificates.

Address	<b>TELEPHONE</b>
	Address

APPLICANT'S STATEMENT: I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment. In the event of employment, it is understood my employer maintains employment at will and that I may be discharged at any time without cause. I understand that false or misleading information given in my application or interview may result in discharge. I understand also, that I am required to abide by all Company policies and procedure.

I agree that I will settle any and all previously unasserted claims, disputes or controversies arising out of or relating to my application for employment, employment and/or cessation of employment with KEERS Remediation, Inc. exclusively by final and binding arbitration before a neutral Arbitrator.

I have read the entire 6 pages of this application and I fully understand the conditions of the words involved.

Signature	Date
	FOR OFFICE USE ONLY
EMPLOYEE #	STARTING PAY
DATE OF HIRE	DATE OF TERMINATION
BIRTH DATE	Sex M F

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